

2018 Statement of Income and Expenses

(RSA Chapter 15)	PEIAED
NUV	V 0 1 2018
PLEASE PRINT	HAMPSHIRE
1. Name of Lobbyist(s) Have U " Web" Montgonery DEPART	MENT OF STATE
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership, firm or corporation)	
(Name of partnership, firm or corporation)	
116 N.Main > Conord NH or Business Address: (Street) (Town/City) (State) (Zig	3301
Business Address: (Street) (Town/City) (State) (Zit	p Code)
(63) 391 7898 () e-mail	
(Full Name of Client as it appears on the Lobbyist Registration Form) OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed by	below which are
<u>OR</u>	below which are
OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed by	below which are
OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed by unrelated to any particular client. IV. Date of Report April 25, 2018 July 25, 2018 July 25, 2018	below which are
OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed by unrelated to any particular client. IV. Date of Report April 25, 2018 July 25, 2018 July 25, 2018 October 31, 2018 January 30, 2019 January 30, 2019	ort. 🏻
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed to unrelated to any particular client. IV. Date of Report April 25, 2018 Solution July 25, 2018 October 31, 2018 October 31, 2018 October 31, 2018 January 30, 2019 activity from 10/1/18 to 12/31/18 V. There have been no fees received and no reportable transactions made since the last report of this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Concord, NH 03301.	ort. 🏻
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed by unrelated to any particular client. IV. Date of Report April 25, 2018 Solution July 25, 2018 October 31, 2018 October 31, 2018 October 31, 2018 Activity from 4/1/18 to 6/30/18 October 31, 2018 January 30, 2019 activity from 7/1/18 to 9/30/18 V. There have been no fees received and no reportable transactions made since the last reports by this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A— Fees and Expenses	ort. 🛭 Room 204,
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed by unrelated to any particular client. IV. Date of Report April 25, 2018 IV. Date of Report April 25, 2018 October 31, 2018 October 31, 2018 October 31, 2018 Activity from date of registration to 3/31/18 October 31, 2018 Activity from 4/1/18 to 6/30/18 January 30, 2019 activity from 10/1/18 to 12/31/18 V. There have been no fees received and no reportable transactions made since the last report of this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Concord, NH 03301. VI. Check if additional reports are attached:	ort. 🛭 Room 204,

Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true

and complete to the best of my knowledge and belief.

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Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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NEW HAMPSHIRE DEPARTMENT OF STATE

1. Name of Lobbyist(s) Hoell "Hok" Monkon	ery
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership, firm or corporation)	
(Name of partnership, firm or corporation)	1 11.2
III. Name of Client	Date10/29/18
 IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses: a) Total of all fees received in this reporting period b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year). c) Total of all fees received to date (Add lines a and b) 	a) \$
 Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office e individual expenses where the expenditure was of \$25.00 or less (for examplunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this repeating purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid expenses; (b) the aggregate total of all ole: meals purchased during a business ess than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for lue of greater than \$25, purchase of a ter than \$25, but not greater than \$50, s, expense reimbursement, or political
 a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less. 	a) \$ \(\frac{1}{2023.46} \)
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	lobbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or aff	irm that the foregoing information
is true and complete to the best of my knowledge and belief.	
	10/24/18 (Date)
(Signature of lobbyist)	(Date)
(Print Name of lobbyist)	
(Print Name of lobbyist)	

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NEW HAMPSHIRE DEPARTMENT OF STATE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

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NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist's partner (Name of partnersh III. Name of Client Political Contributions For each political contribution client/lobbyist and lobbying fi	rship, firm or corporation)	oration, if any:		124 1/2
II. Name of Client Political Contributions For each political contribution				124 1/8
III. Name of Client Political Contributions For each political contribution				124 //8
Political Contributions For each political contribution			Date	124 //X
Political Contributions For each political contribution				<u>, ,,,</u>
	that is reportable purm, indicate the follo	ursuant to RSA Chapte owing:	r 664 paid on beha	alf of the
Full name of candidate:	Drescott	Russel ((Middle Name/l	
	(Last Name)	(First Name)	•	
Amount of contribution \$	Jou	Office Candidate is	Seeking	
	Dono	M. s	<u> </u>	
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/l	Initial)
Amount of contribution \$	50	Office Candidate is	,	•
If the contribution is an in-kind of actual cost of the in-kind contribenter an estimated value and the	oution on the line abov	description of the goods e for amount of contribu	or services provide	d, and enter to
Full name of candidate:	Rollen (Last Name)	(First Name)	(Middle Name	(Initial)

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s) II. Name of lobbyist's partn	ership, firm or corp	oration, if any:	(
	_		
(Name of partner	rship, firm or corporation)		10/2-/10
III. Name of Client		Date	10/29/12
	<u> </u>		
Political Contributions For each political contribution client/lobbyist and lobbying	on that is reportable firm, indicate the fo	oursuant to RSA Chapter 664 pa lowing:	id on behalf of the
	Dos. T.	Katherane	
Full name of candidate:	(Last Name)	(First Name) (Mid	dle Name/Initial)
Amount of contribution \$		Office Candidate is Seeking _	Res
Amount of contribution 3		Office Candidate is Seeking _	
enter an estimated value and th	ne word "estimate."	re for amount of contribution. If the	
enter an estimated value and th	ne word "estimate."		
enter an estimated value and th	ne word "estimate."		
enter an estimated value and th	(Last Name)	Son (Mic	Idle Name/Initial)
enter an estimated value and th	(Last Name)		Idle Name/Initial)
Full name of candidate: Amount of contribution \$	(Last Name) d contribution, provideribution on the line abo	Son (Mic	Idle Name/Initial) Senote es provided, and enter
Full name of candidate: Amount of contribution \$ If the contribution is an in-kinactual cost of the in-kind contribute and the contribution are contributed as a contribute and the contribution are contributed as a contribute and the contri	(Last Name) d contribution, provideribution on the line abo	(First Name) (Mic	Idle Name/Initial) Services provided, and enter
Full name of candidate: Amount of contribution \$	(Last Name) d contribution, provideribution on the line abo	(First Name) (Mice Candidate is Seeking a description of the goods or service for amount of contribution. If the	Idle Name/Initial) Serve

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

(Name of partn	ership, firm or corporation)		
II. Name of Client	333		Date
Political Contributions For each political contribut client/lobbyist and lobbying	ion that is reportable pg firm, indicate the fol	oursuant to RSA Chapte llowing:	er 664 paid on behalf of the
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	500		Seeking & tc
If the contribution is an in-kin actual cost of the in-kind cont enter an estimated value and t	ribution on the line abov	a description of the goods we for amount of contribut	s or services provided, and enter the cition. If the actual cost is not known
actual cost of the in-kind cont	ribution on the line abov	a description of the goods we for amount of contribut	s or services provided, and enter totion. If the actual cost is not know
actual cost of the in-kind cont	tribution on the line about the word "estimate." Mouse	Chik	tion. If the actual cost is not know
actual cost of the in-kind cont enter an estimated value and t	tribution on the line about the word "estimate."	a description of the goods we for amount of contribute (First Name) Office Candidate is	(Middle Name/Initial)
Full name of candidate: Amount of contribution \$	Mewse (Last Name) and contribution, provide tribution on the line about the word "estimate."	(First Name) Office Candidate is a description of the good	(Middle Name/Initial)

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
(If more than three contributions were made, report additional contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.
10/29/18
(Signature of lobbyist) (Date)
(Print Name of lobbyist)
